What is claimed is:

1. Apparatus for endoscopically forming, approximating and securing a plurality of tissue folds within a patient, the apparatus comprising:

a device adapted to endoscopically form the plurality of tissue folds;

means for approximating the plurality of tissue folds:

at least one anchor assembly; and an anchor delivery system configured to endoscopically deploy the at least one anchor assembly across the plurality of tissue folds to secure the plurality of tissue folds.

- 2. The apparatus of claim 1, wherein the anchor delivery system comprises a flexible delivery catheter.
- 3. The apparatus of claim 2, wherein the flexible delivery catheter is configured to buckle into transverse alignment with at least one of the plurality of tissue folds.
- 4. The apparatus of claim 2, wherein the anchor delivery system further comprises a needle configured for advancement through the flexible delivery catheter and for transverse passage through the plurality of tissue folds.
- 5. The apparatus of claim 4, wherein the anchor assembly is configured for delivery through the needle.

- 6. The apparatus of claim 1, wherein the device comprises a tissue engaging assembly configured to engage a mucosal layer of a patient's stomach.
- 7. The apparatus of claim 1, wherein the device comprises a tissue engaging assembly configured to engage a muscularis layer of a patient's stomach.
- 8. The apparatus of claim 1, wherein the devices comprises a tissue engaging assembly configured to engage a serosal layer of a patient's stomach.
- 9. The apparatus of claim 1, wherein the plurality of tissue folds comprise serosa-to-serosa tissue contact and the anchor assembly is adapted to secure the serosa-to-serosa tissue contact.
- 10. The apparatus of claim 1 wherein the device further comprises a shape-lockable guide tube.
- 11. A method of endoscopically forming, approximating and securing a plurality of tissue folds within a patient, the method comprising:

endoscopically forming a first tissue fold; placing a first anchor across the first tissue fold;

endoscopically forming at least one additional tissue fold, thereby forming the plurality of tissue folds;

placing at least one additional anchor across the at least one additional tissue fold;

approximating the plurality of tissue folds; and

securing the approximated plurality of tissue folds with the anchors.

- 12. The method of claim 11, wherein the first tissue fold and the at least one additional tissue fold are not attached to one another.
- 13. The method of claim 11, wherein the first tissue fold is formed from an anterior segment of the patient's stomach and at least one additional tissue fold is formed from a posterior segment of the patient's stomach opposite the anterior segment.
- 14. The method of claim 11, wherein the first tissue fold and the at least one additional tissue fold are disposed inferior to a patient's gastroesophageal junction.
- 15. A method of performing gastric reduction procedure comprising:

endoscopically forming, approximating and securing a first plurality of tissue folds in a first plane within a patient's stomach; and

endoscopically forming, approximating and securing at least one additional plurality of tissue folds in at least one additional plane within the patient's stomach.

16. The method of claim 15, wherein the first plane and the at least one additional plane are substantially parallel to one another.

- 17. The method of claim 15, wherein the first plurality of tissue folds and the at least one additional plurality of tissue folds are not attached to one another.
- 18. The method of claim 15, wherein the first plurality of tissue folds and the at least one additional plurality of tissue folds each comprise at least one tissue fold from an anterior segment of the patient's stomach and at least one tissue fold from an opposing posterior segment of the patient's stomach.
- 19. The method of claim 15, wherein the first plurality of tissue folds and the at least one additional plurality of tissue folds are disposed inferior to the patient's gastroesophageal junction.